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CONFIRMATION NO. 8125

<b>SERIAL NUMBER</b> 10/825,253	<b>FILING OR 371(c) DATE</b> 04/15/2004 <b>RULE</b>	<b>CLASS</b> 436	<b>GROUP ART UNIT</b> 1709	<b>ATTORNEY DOCKET NO.</b> 04-262
<b>APPLICANTS</b> Moon Hwan Kim, Kyoungki-do, KOREA, REPUBLIC OF; Keun Ki Kim, Seoul, KOREA, REPUBLIC OF; Gang Cui, Younkil-si, CHINA; Hakhyun Nam, Seoul, KOREA, REPUBLIC OF; Geun-Sig Cha, Seoul, KOREA, REPUBLIC OF;				
<b>** CONTINUING DATA *****</b> <b>** FOREIGN APPLICATIONS *****</b> <i>CTM</i> REPUBLIC OF KOREA KR10-2003-0028840 05/07/2003 <i>CTM</i>				
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED** SMALL ENTITY **</b> <b>** 06/24/2004</b>				
Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged <i>[Signature]</i> Examiner's Signature Initials		<b>STATE OR COUNTRY</b> KOREA, REPUBLIC OF	<b>SHEETS DRAWING</b> 9	<b>TOTAL CLAIMS</b> 5
			<b>INDEPENDENT CLAIMS</b> 1	
<b>ADDRESS</b> 34704				
<b>TITLE</b> Dual blood glucose meter				
<b>FILING FEE RECEIVED</b> 385	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	